POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION			 	
D.I.P.E. CLASSIFIER		La	2/2/16	
FORMALITY REVIEW	nek	570	03/07/	
RESPONSE FORMALITY REVIEW	7007	76 76 /	05/07-10	

INDEX OF CLAIMS

•	Rejected	N	Non-elected
	Allowed	I	
_	(Through numeral) Canceled	Α	
÷	Restricted	0	

Claim Date	Claim	1	Date	Claim	Date
Original S/z/c4					
Final Original S/2/c4	Final			Final	
				Final	
04	51			101	TT
2 /	52			102	
	53			103	
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5 1	55			105	
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8 /	58	-L., I I I I		107	
9 /	59			108	
10 /	60		++++	109	
1117	61			110	+++++
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13 /	63			112	
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15 /	65		 	114	++++
16 🗸	66		╶┤╶╏╸╏╺╏╸ ┩	116	
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18 0	68	† † † † †	+	118	┤┝┤┝╎
19 🗸	69		 	119	1
20 🗸	70		 	120	
21 🗸	71	 	+ 	121	+++++
22 /	72		++++	122	╅┼┼┼┼┼┼
23 /	73		- - - - - - - - - - 	123	
24 /	74		 - - - - 	124	┼┤┤ ┼┼┼┤
25 🗸	75		 	125	┼┼┼┼┼ ┼┼┤
26 🗸	76			126	┼┼┼┼┼
27-	77			127	++++
28	78			128	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
29 /	79			129	
30 /	80			130	
31 🗸	81			131	
	82			132	
33 🗸	83			133	
138 / 1	84	++++	4-1-1-1-1	134	
36 J	85 86		++++	135	
	87			136	
38 🗸	88		 - - - 	137	
39 🗸	89		 	138	
1401	90		 	139	++++
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43			+ + + + -	142	
44	93	++	 	143	
45	94	++-+-	++++	144	
46	96		++++	145	
47	97	++++	 	146	
45	98	++++	 	147	
49	99	++++	 	148	
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